

2700 INTERNAL TRANSFER REQUEST FOR S.N.

09/532,412

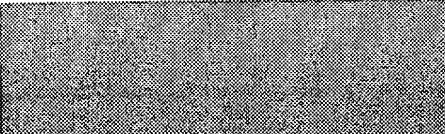
| | |
|-------------------------|--|
| DATE: <u>6/9/00</u> | FROM: <u>Tim Johnson</u> (print name) |
| REASON(S): | |
| FORWARD TO: | A. You had Parent <input type="checkbox"/> (check box) |
| A. Art Unit: <u>345</u> | B. See Title <input type="checkbox"/> (check box) |
| B. Class: <u>326</u> | C. See Abstract <input type="checkbox"/> (check box) |
| C Subclass: <u>326+</u> | D. See Claim(s): _____ |

FURTHER EXPLANATION IF NEEDED:

user interface

| | |
|--------------------|--|
| DATE: _____ | FROM: _____ (print name) |
| REASON(S): | |
| FORWARD TO: | A. You had Parent <input type="checkbox"/> (check box) |
| A. Art Unit: _____ | B. See Title <input type="checkbox"/> (check box) |
| B. Class: _____ | C. See Abstract <input type="checkbox"/> (check box) |
| C Subclass: _____ | D. See Claim(s): _____ |

FURTHER EXPLANATION IF NEEDED:

| | |
|--|--|
| DATE: _____ | FROM: _____ (print name) |
| REASON(S): | |
| FORWARD TO CLASSIFIER  | A. You had Parent <input type="checkbox"/> (check box) |
| | B. See Title <input type="checkbox"/> (check box) |
| | C. See Abstract <input type="checkbox"/> (check box) |
| | D. See Claim(s): _____ |

FURTHER EXPLANATION IF NEEDED:

| | |
|------------------------------------|--|
| DISPOSITION BY 2700 CLASSIFICATION | |
| DATE: _____ | CLASSIFIER: _____ |
| REASON(S): | |
| FORWARD TO: | A. You had Parent <input type="checkbox"/> (check box) |
| A. Art Unit: _____ | B. See Title <input type="checkbox"/> (check box) |
| B. Class: _____ | C. See Abstract <input type="checkbox"/> (check box) |
| C Subclass: _____ | D. See Claim(s): _____ |

FURTHER EXPLANATION IF NEEDED: